

## UNITED STATES DEPARTMENT OF THE INTERIOR NATIONAL PARK SERVICE

OMB Approved No. 1024-0009 Form 10-168 Rev. 2011

## HISTORIC PRESERVATION CERTIFICATION APPLICATION PART 2 – DESCRIPTION OF REHABILITATION

NPS Project Number

con bet	tructions: This page of the form must appear exactly tinued on blank pages. The National Park Service co- ween the application form and other, supplementary cedence. A copy of this form will be provided to the In-	rtification decision is b material submitted with	ased on the descriptions in this ap n it (such as architectural plans, dr	·		
1.	Property Name	Property Name				
	Street					
				State Zip		
	Name of Historic District					
	Listed individually in the National Register of Historic Places; date of listing					
	Located in a Registered Historic District; name	of district				
	☐ Part 1 – Evaluation of Significance submitted?	Date submitte	d	Date of certification		
2.	Data on building and rehabilitation project	t				
	Date of construction		Cost of rehabilitation (estimated	i)		
	Type of construction		•	itation /		
	Start date (estimated)		Use(s) before / after rehabilitation	on/		
	Completion date (estimated)		Number of housing units before	e / after rehabilitation /		
	This application covers phase number of _	phases Nu	imber of low-moderate income hor	using units before / after rehabilitation /		
3.	Project Contact (if different from Owner)					
₩.	Name					
٠.	Name					
	Street		City			
	Street		City			
4.	Street Zip  Owner		City Telephone			
<b>4.</b> I he	Street Zip  Owner	the best of my knowle	City Telephone  dge, correct and that I own the pro	operty described above. I understand that falsification		
<b>4.</b> I he	Street Zip  State Zip  Owner  reby attest that the information I have provided is, to ual representations in this application is subject to cr	the best of my knowle iminal sanctions of up	City Telephone  dge, correct and that I own the proto \$10,000 in fines or imprisonment	operty described above. I understand that falsification		
<b>4.</b> I he	Street Zip  Owner  reby attest that the information I have provided is, to ual representations in this application is subject to cr	the best of my knowle minal sanctions of up Signature	City Telephone  dge, correct and that I own the proto \$10,000 in fines or imprisonment	operty described above. I understand that falsification nt for up to five years pursuant to 18 USC 1001.		
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## HISTORIC PRESERVATION CERTIFICATION APPLICATION PART 2 – DESCRIPTION OF REHABILITATION

Property name _		NPS Project Number			
Property address					
	<b>Detailed description of rehabilitation work</b> Reproduce this page as needed to describe all work or create a comparable format with this information. Number items consecutively to describe all work, including building exterior and interior, additions, site work, landscaping, and new construction.				
Number	Feature	Date of Feature			
Describe exist	ப்ng feature and its condition				
	and impact on feature	Drawing numbers			
	·				
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Describe exist	ling feature and its condition				
Photo numbers _		Drawing numbers			

Describe work and impact on feature

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